



# **TEMPORARY USE PERMIT (SPECIAL EVENT)**

## **APPLICATION PACKET**

Development Center  
16000 N Civic Center Plaza Surprise, AZ 85374  
623-222-3000 Fax 623-222-3002 TTY 623-222-1002

## APPLICATION INFORMATION

The attached application and information relates to temporary use/special event requests.

There are multiple departments or divisions that are impacted by these events. Please ensure you have all information and supporting documentation necessary for staff to provide a comprehensive review of the request.

This packet contains the following:

1. Submittal Checklist
2. Procedure
3. Temporary Use/Event Application
4. Traffic Control Permit Requirements
5. Fire Department Application
6. State of Arizona Application for Special Event License
7. Surprise Police Department Off Duty Letter Agreement

## WHEN PREPARING PLANS, REFER TO THE FOLLOWING RELATED CODES, STANDARDS, AND GUIDELINES:

Surprise Municipal Code*	National Fire Protection Association
Chapters 34 and 122	AASHTO
Engineering Development Standards*	Integrated Water Master Plan*
2006 International Building Code	2006 International Fire Code and Local Amendments
Accessibility	Access, hydrant locations, and
2006 National Electrical Code	extinguishers

***\*Links to these items can be found at [www.surpriseaz.gov](http://www.surpriseaz.gov).***

## **SUBMITTAL CHECKLIST**

All information and documentation indicated below shall be submitted a minimum of fifteen (15) business days prior to the event, per Chapter 122 of the Surprise Municipal Code, however, additional time may be necessary depending on the activities proposed.

- ☐ Completed application
- ☐ Fire Department Application (Required when the event includes display and/or sales of fireworks only)
- ☐ Application review fee: \$120
- ☐ A comprehensive site plan which includes the following:  
Entrances to the event, location of fences (including type and height), stage, sound amplification systems, tents or canopies, signage, cooking areas, portable restrooms or permanent restroom facilities, generators, carnival or amusement rides, fireworks, parking areas, entrances to areas for alcohol consumption, alcohol service areas, security check areas, street or alley closures, location of emergency medical services, parade routes, and all other special features that may apply. A traffic control plan including traffic flow and controls may also be required. In addition to the site plan, an aerial of the site is required.
- ☐ Notarized property owner authorization - Required when property owner is not the applicant.
- ☐ Security Plan – See page 11.
- ☐ Certificate of Insurance – See requirements on page 12.
- ☐ Traffic Control Plan – See permit requirements on page 14.
- ☐ Application for Special Event License – Required when alcohol will be served or sold.
- ☐ Facility Use Agreement – Required when event proposed on city property.
- ☐ City of Surprise Business License – Per Chapter 34 of the Surprise Municipal Code.
- ☐ Maricopa County Health Department Food Handling Permit

**INCOMPLETE SUBMITTALS WILL NOT BE ACCEPTED**

## PROCEDURE

- ☐ Counter complete submittal of the formal application and supporting documentation accepted for review.
- ☐ Meet with Fire Department staff regarding any special instructions for the event. (This step is required for any application which includes fireworks sales or public display. This step may take place prior to submittal, but is required prior to approval by the Fire Department.)
- ☐ Complete submittal reviewed for compliance with all applicable codes, standards, and guidelines.
- ☐ If revisions are necessary, applicant shall make changes and application materials are resubmitted. (This step may be repeated)
- ☐ Upon approval, applicant will be notified and provided an approval document which includes any conditions applicable to the event proposed.
- ☐ After approval, applicant will contact the Fire Department for any necessary inspections. The approval document shall be available on site at the time of inspection by city staff.

## SECTION 1: PROPERTY INFORMATION

Property address (if known): \_\_\_\_\_

Property location: \_\_\_\_\_

Parcel numbers(s): \_\_\_\_\_ Size in acres: \_\_\_\_\_ Lot range: \_\_\_\_\_

Subdivision name: \_\_\_\_\_

Current zoning: \_\_\_\_\_ Related case(s): \_\_\_\_\_

### **Applicant: (Contact must be on site during the event)**

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

### **Property owner:**

Name: \_\_\_\_\_ Contact: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

**Note: If applicant is not the owner, a notarized property owner authorization is required.**

## SECTION 2: EVENT INFORMATION

Title of event: \_\_\_\_\_

Location of event: \_\_\_\_\_

Event date(s): \_\_\_\_\_

Set up date/time: \_\_\_\_\_ Dismantle date/time: \_\_\_\_\_

Event category: (Check all applicable descriptions)

- |  |  |                                       |  |
|--|--|---------------------------------------|--|
| <input type="checkbox"/> Carnival        | <input type="checkbox"/> Circus            | <input type="checkbox"/> Concert      | <input type="checkbox"/> Craft Fair      |
| <input type="checkbox"/> Exhibition      | <input type="checkbox"/> Festival/Fair     | <input type="checkbox"/> Food Fair    | <input type="checkbox"/> Fund Raiser     |
| <input type="checkbox"/> Holiday Event   | <input type="checkbox"/> Large Picnic      | <input type="checkbox"/> Parade       | <input type="checkbox"/> Political Rally |
| <input type="checkbox"/> Race            | <input type="checkbox"/> Religious/Revival | <input type="checkbox"/> School Event | <input type="checkbox"/> Sports          |
| <input type="checkbox"/> Tent/Retail     | <input type="checkbox"/> Walk-A-Thon       | <input type="checkbox"/> Bike-A-Thon  | <input type="checkbox"/> Sidewalk Sale   |
| <input type="checkbox"/> Fireworks Sales | <input type="checkbox"/> Fireworks Display | <input type="checkbox"/> Other: _____ |  |

Event schedule and anticipated attendance:

	Date:	Day:	From A.M./P.M.	To A.M./P.M.	Anticipated Daily Attendance:	Anticipated Peak Daily Attendance:
Day 1:	_____	_____	_____	_____	_____	_____
Day 2:	_____	_____	_____	_____	_____	_____
Day 3:	_____	_____	_____	_____	_____	_____
Day 4:	_____	_____	_____	_____	_____	_____
Day 5:	_____	_____	_____	_____	_____	_____
Day 6:	_____	_____	_____	_____	_____	_____
Day 7:	_____	_____	_____	_____	_____	_____
Day 8:	_____	_____	_____	_____	_____	_____
Day 9:	_____	_____	_____	_____	_____	_____
Day 10:	_____	_____	_____	_____	_____	_____

What is attendance estimate based on? (Past, advance ticket sales, etc.) \_\_\_\_\_

Has this event ever been held at another location? ☐ Yes ☐ No

If yes, please explain: \_\_\_\_\_

Will alcohol be served or sold at the event? ☐ Yes ☐ No

If yes, please complete page 16 of this application

Will there be a charge for admission? ☐ Yes ☐ No

If yes, provide all price categories: \_\_\_\_\_

Estimated gross receipts from the event: \_\_\_\_\_

Percentage of receipts distributed to non-profit organizations: \_\_\_\_\_

Is this event city sponsored or co-sponsored? ☐ Yes ☐ No

If yes, provide name of the department, and contact: \_\_\_\_\_

Will the event be open to the public? ☐ Yes ☐ No

Is this event for employees/members only? ☐ Yes ☐ No

Will there be entertainment? ☐ Yes ☐ No

If yes, provide the following:

Type: \_\_\_\_\_ Name: \_\_\_\_\_ Time: \_\_\_\_\_

Type: \_\_\_\_\_ Name: \_\_\_\_\_ Time: \_\_\_\_\_

Type: \_\_\_\_\_ Name: \_\_\_\_\_ Time: \_\_\_\_\_

Type: \_\_\_\_\_ Name: \_\_\_\_\_ Time: \_\_\_\_\_

Type: \_\_\_\_\_ Name: \_\_\_\_\_ Time: \_\_\_\_\_

If music, what type of music? \_\_\_\_\_

If a stage is proposed, provide the dimensions: \_\_\_\_\_

Indicate the number of speakers to be used and the size of amplification system: \_\_\_\_\_

Will food be served or sold? ☐ Yes ☐ No

List any vendors/caterers to be used at the event:

Name	Address	Phone Number	Business Lic. No.
------	---------	--------------	-------------------

Method of Food Preparation	
----------------------------	--

Equipment Used
----------------

Name	Address	Phone Number	Business Lic. No.
------	---------	--------------	-------------------

Method of Food Preparation	
----------------------------	--

Equipment Used
----------------

Name	Address	Phone Number	Business Lic. No.
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Method of Food Preparation	
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Equipment Used
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Name	Address	Phone Number	Business Lic. No.
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Method of Food Preparation	
----------------------------	--

Equipment Used
----------------

Name	Address	Phone Number	Business Lic. No.
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Method of Food Preparation	
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Equipment Used
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***(All vendors must have a City of Surprise Business License and proper Health Department Permits)***

### SECTION 3: EVENT DETAILS

Will the event include any of the following?

TENTS, CANOPIES, OR MEMBRANE STRUCTURES:

☐ Yes ☐ No If yes, provide the following:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Tent Number	Intended Use	Size	Sq Ft	Occ. Load	Exits
1					
2					
3					
4					
5					

The following information shall be reflected on the site plan when tents or canopies are proposed:

- The minimum separation from property line, building, other tents, canopies, vehicles.
- Fire access roadway, including width. (Minimum 20' required)
- Exits and exit signs.
- Cooking and/or heating equipment.
- LPG containers and equipment.
- Flammable or combustible liquids and containers.
- Generators.
- Fire extinguishers.
- Anchorage.

PORTABLE RESTROOMS: ☐ Yes ☐ No If yes, provide the following:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

SANITATION: ☐ Yes ☐ No If yes, provide the following:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_



FIREWORKS: ☐ Yes ☐ No If yes, please include a completed Fire Department Application. A meeting with the Fire Department is required to discuss the safety requirements. This step may take place prior to the TUP submittal, but is required prior to approval by the Fire Department.

ELECTRICAL/GENERATOR: ☐ Yes ☐ No If yes, provide the following:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

CARNIVAL/AMUSEMENT RIDES: ☐ Yes ☐ No If yes, provide the following:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Note: If carnival/amusement rides, and/or inflatables are proposed, applicant must provide certified copies of the annual inspection records, signed by NARRSO Amusement Ride Inspector, completed within the last twelve months.**

SIGNS/BANNERS : ☐ Yes ☐ No If yes, provide the following:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

**Note: If signage is proposed, location shall be reflected on the site plan, and details with dimensions shall be provided for each sign.**

INFLATABLES: ☐ Yes ☐ No If yes, provide the following:

Company: \_\_\_\_\_

Address: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Describe how the inflatable's will be secured? \_\_\_\_\_

\_\_\_\_\_

OTHER – Description of any other proposed activities not previously described: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### SECTION 4: USE OF CITY FACILITIES

Will the event be held on city property? ☐ Yes ☐ No

If yes, is there a Facility Use Agreement attached? ☐ Yes ☐ No

Will any city facilities be used? ☐ Yes ☐ No

If yes, provide the following:

Facility: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Facility: \_\_\_\_\_ Person Contacted: \_\_\_\_\_

Will any city electric or water hookups be needed? ☐ Yes ☐ No

If yes, provide the following: (For electricity, provide amps)

Location: \_\_\_\_\_ Service needed: \_\_\_\_\_

Location: \_\_\_\_\_ Service needed: \_\_\_\_\_

Location: \_\_\_\_\_ Service needed: \_\_\_\_\_

Location: \_\_\_\_\_ Service needed: \_\_\_\_\_

#### SECTION 5: STREETS/TRAFFIC (*Additional fees may apply, see traffic control permit requirements attached*)

Does the event propose closing, blocking, or use of any of the following?

CITY STREETS: ☐ Yes ☐ No If yes, provide the following:

Street(s): \_\_\_\_\_

From/To: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Street(s): \_\_\_\_\_

From/To: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

SIDEWALKS: ☐ Yes ☐ No If yes, provide the following:

Sidewalk(s): \_\_\_\_\_

From/To: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Sidewalk(s): \_\_\_\_\_

From/To: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

PUBLIC PARKING LOTS: ☐ Yes ☐ No If yes, provide the following:

Parking Lot(s): \_\_\_\_\_

From/To: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Number of parking spaces available: \_\_\_\_\_

Parking Lot(s): \_\_\_\_\_

From/To: \_\_\_\_\_

Date: \_\_\_\_\_ Time: \_\_\_\_\_

Will shuttles be used? ☐ Yes ☐ No

If parking lots are not used, where will attendees park? \_\_\_\_\_

Off-site temporary parking restrictions may be required. Off-duty police officers may also be required at key intersections or locations for traffic control.

TRAFFIC CONTROL PLAN ATTACHED: ☐ Yes ☐ No

Barricade company: \_\_\_\_\_

24-Hour emergency contact: \_\_\_\_\_

PARADES/RACES/MARCHES/BIKE-A-THONS/WALK-A-THONS, ETC.

If event is proposed on city right of way, provide route or location: \_\_\_\_\_

Indicate space between units for a march or parade: (in feet) \_\_\_\_\_

Number of people proposed: \_\_\_\_\_

Participants: \_\_\_\_\_ Spectators: \_\_\_\_\_

Number of vehicles: \_\_\_\_\_

Number of floats: \_\_\_\_\_

Number of bands: \_\_\_\_\_

Number of animals: \_\_\_\_\_

What company is responsible for clean-up? \_\_\_\_\_

**Note: Route may be altered for the protection of participants and citizens.**

## **SECTION 6: EVENT SECURITY**

A security plan shall be submitted with the application for the event. The Surprise Police Department will review the plan and may require the use of off-duty police officers for the event at the applicant's expense. Off-duty police officers are required for any event on city property where alcohol is served or sold.

For events where alcohol will be available, the security plan must include the following information. Adherence to these requirements is necessary in order for the application to be approved.

- Type of event, activities, clientele, location, and time of day.
- Number and type of physical control barriers; i.e. fencing, barricading, walls, locked or limited access doors that control and limit access to and from areas where alcohol is being sold or served.
- Sales and consumption area must be designated. It must include controlled entrances and exits to limit access to people who can legally buy and consume alcohol.
- Minors are not allowed in the area designated for alcohol.

Off-duty police officers need to be requested by completing the Off-Duty Letter Agreement attached, and returning it to the Surprise Police Department.

Have off-duty Surprise Police Officers been requested? ☐ Yes ☐ No

## SECTION 7: INSURANCE REQUIREMENTS

Applicant shall maintain, at its sole cost and expense, in full force and effect, during the term of this agreement, insurance with the following policy limits:

- a. Comprehensive General Liability: One million dollars (\$1,000,000) per occurrence and two million dollars (\$2,000,000) combined aggregate.
- b. \*Comprehensive General Liability: Nine million dollars (\$9,000,000) per occurrence and one million dollars (1,000,000) combined aggregate.

***\*Option B is required for fireworks sales or public display only.***

Insurers. All insurance provided for herein above shall be affected under valid and enforceable policies issued by financially responsible insurers which meet the requirements for insurers which are subject to the service of legal process in the State of Arizona and rated A- or better by A.M. Best Company. All insurance obtained pursuant to this Agreement shall be primary, noncontributory, not contingent upon and not in excess of any other insurance, and shall be carried in favor of and **name City as a named insured**. In the event any insurance policy required by this Agreement is written on a "claims made" basis, coverage shall extend for two (2) years past termination of this Agreement.

Certificates of Insurance. Prior to commencement of the event under this Agreement, applicant shall furnish city with certificates of insurance, or formal endorsements, issued by the applicants insurer(s), as evidence that policies providing the required coverage's, conditions and limits by this Agreement are in full force and effect. If a policy does expire during the term of this Agreement, a renewal certificate must be sent to the city fifteen (15) days prior to the expiration date.

***Note: Additional insurance may be required if amusement/carnival rides are proposed.***

## SECTION 8: CERTIFICATION

I hereby certify that I am the applicant filing this application as listed in Section 1, and the statements made in this application are true and complete to the best of my knowledge, and that I am authorized to execute the application.

Intentional omissions or falsification of information is sufficient grounds for denial of the application and subsequent revocation of the permit.

I agree to indemnify the city and its respective officers, agents and employees from any and all losses, claims liabilities, damages, costs, and expenses, including reasonable attorney's fees and court costs, resulting from the conduct of the applicant, sponsor or promoter, their employees, suppliers, vendors or agents, or any of their guests, invitees or licensees with regard to the event applied for. I agree to indemnify the city and its respective officers, agents and employees from any and all losses, claims liabilities, damages, costs and expenses, including reasonable attorney's fees and court costs, resulting from any facility, park or lake closure due to inclement weather, an issued warning or other emergency situation. In such an instance, I understand that all event participants must follow the city's guidelines and procedures for lake/facility evacuation and that this event is being held inside the city limits and all city rules and regulations apply. I also understand that the city reserves the right to determine that park facilities are usable as a result of inclement weather.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

State of Arizona     )  
                                  ) ss  
County of Maricopa )

This instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
By \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission Expiration

## TRAFFIC CONTROL PERMIT REQUIREMENTS:

Any traffic control permit issued may grant some or all of the following:

- i. Daytime off-peak setup from the hours of 8:30 am to 3:30 pm.
- ii. Nighttime off-peak setup in non-residential areas from the hours of 9:00 pm to 5:00 am.
- iii. A 24 hour setup if the work can be shown unable to be completed with either a daytime or nighttime off-peak setup.

### A. When to submit a Traffic Control Plan to the city:

The purpose of a traffic control plan is to encourage forethought as to the time of day, sequence of construction, degree of restriction and traffic control needed. The city based on field conditions at the time of work may modify an approved Traffic Control Plan. An approved Traffic Control Plan shall be on site at all times by the Contractor or Permittee. Failure to comply with this requirement may result in the issuance of a cease work order.

A Traffic Control Plan shall be required for all projects that:

- i. Divert, detour, or interrupt normal flow of vehicle and/or pedestrian traffic.
- ii. For shoulder closures when work will occur in the right of way within 20 feet of the edge of a traveled roadway.

### B. How to submit a Traffic Control Plan to the city:

Traffic Control Plans may range in complexity from use of typical illustrations in an approved traffic control manual to a detailed site plan showing signing, type of intersection, barricading, diversions, detours, and project phasing. In all cases, the required Traffic Control Plan shall satisfactorily address all construction restrictions, the requirements of the permit and these regulations.

- i. All traffic control plan submittals shall be submitted to the city by a company that possesses a valid traffic control permit.
- ii. The submittal may be by facsimile at phone number (623) 222-1703 or email at [traffic.control@surpriseaz.gov](mailto:traffic.control@surpriseaz.gov)
  - a) For restrictions the Traffic Control Plans (TCP) and notification must be submitted for review at least two working days (48 hours) prior to start of construction. Form TE-1 shall be completed in full and submitted with the TCP to begin review.
  - b) For full closures the TCP and notification must be submitted for review at least twenty (20) business days prior to the start of construction. Form TE-2 shall be completed in full and submitted with the TCP to begin review.
- iii. In no way will submission of a TCP guarantee approval for start of construction at the 48-hour/20 day mark. Construction is not authorized to proceed without the city's approval of the TCP and concurrence that construction can proceed with minimum public and traffic impact.

- iv. Once Form TE-1/TE-2 and TCP are approved, any change to the TCP or specific information approved in a previous submittal shall require a re-submittal of form TE-1/TE-2 and the TCP.
- v. All traffic control plans shall contain at least the following information clearly stated on every page of the plan:
  - a) Engineering permit number example, E09P-1234. This permit number will be supplied by the contractor.
  - b) Requested start and end date of traffic control setup.
  - c) Requested start and end time of traffic control setup.
  - d) Specific channeling device or barricade required.
  - e) Contractor contact information and any other pertinent information requested by the city.

### **GENERAL TRAFFIC REGULATIONS:**

The following are the minimum requirements for all traffic control, unless otherwise provided for in the permit or as directed by the City Traffic Engineer or designee.

#### **A. Restriction Times**

Traffic restrictions are not permitted on arterial or collector roads during the weekday peak traffic hours of 5:00 am to 8:00 am and 3:30 pm to 9:00 pm. During off peak traffic hours, the minimum number of lanes shall be two lanes (one in each direction, plus left turn lanes at intersections) on streets with four lanes or less, and four lanes on streets with six or more lanes, unless otherwise approved. Major roadways such as Bell Rd shall have hours of restriction on a case-by-case basis, as directed by the City of Surprise.

#### **Number of Existing Lanes**

**More than four lanes**  
**Four or fewer lanes**

#### **Number of Lanes to Maintain Open During Restriction**

**Four lanes (two each direction)**  
**Two lanes (one each direction)**



## **SPECIAL EVENT LIQUOR LICENSE**

Allows a charitable, civic, fraternal, political or religious organization to sell and serve spirituous liquor for consumption only on the premises where the spirituous liquor is sold, and only for the period authorized on the license. This is a temporary license.

The applicant for a special event license must request a special event application from the Department and file the application with the governing body of the city or town, or Board of Supervisors of an unincorporated area of a county (where the special event is to take place) for approval or disapproval. Some local governing bodies may require approximately 60 days prior notice.

If the application is approved by the local authority, and the event meets the requirements for granting the license, the Director will issue a special event license to the qualifying organization.

Qualifying organizations will be granted a special event license for no more than ten (10) days in a calendar year. Events must be held on consecutive days and at the same location or additional licenses will be required. The license is automatically terminated upon closing of the last day of the event or the expiration of the license, whichever occurs first.

The qualified organization must receive at least twenty-five percent (25 %) of the gross revenues of the special event liquor sales.

A person selling spirituous liquor under a special event license must purchase the spirituous liquor from the holder of a license authorized to sell off-sale; except that, in the case of a non-profit organization which has obtained a special event license for the purpose of charitable fund raising activities, a person may receive the spirituous liquor from a wholesaler as a donation.

AVERAGE APPROVAL TIME: One (1) to seven (7) days.

Issued for no more than a cumulative total of ten (10) days in a calendar year. A special event may be held for more than one (1) day, but it must be held on consecutive days and at the same location or additional licenses will be required.

FEES: \$25.00 per day.

### ARIZONA STATUTES AND REGULATIONS:

ARS 4-203.02, 4-244, 4-261; Rule R19-1-228, R19-1-235, R19-1-309.

Disabled individuals requiring special accommodations please call (602) 542-9027

State of Arizona Department of Liquor Licenses and Control  
800 W. Washington, 5th Floor  
Phoenix, AZ 85007  
www.azliquor.gov  
(602)542-5141

**APPLICATION FOR SPECIAL EVENT LICENSE**

Fee = \$25.00 per day for 1-10 day events only

A service fee of \$25.00 will be charged for all dishonored checks (A.R.S. § 44-6852)

**NOTE: THIS DOCUMENT MUST BE FULLY COMPLETED OR IT WILL BE RETURNED.**  
PLEASE ALLOW 10 BUSINESS DAYS FOR APPROVAL

**\*\*Application must be approved by local government before submission to  
Department of Liquor Licenses and Control. (Section #20)**

DLLC USE ONLY
LICENSE #

1. Name of Organization: \_\_\_\_\_

2. Non-Profit/I.R.S. Tax Exempt Number: \_\_\_\_\_

3. The organization is a: (check one box only)

- ☐ Charitable      ☐ Fraternal (must have regular membership and in existence for over 5 years)  
☐ Civic      ☐ Political Party, Ballot Measure, or Campaign Committee  
☐ Religious

4. What is the purpose of this event? \_\_\_\_\_

5. Location of the event: \_\_\_\_\_

Address of physical location (Not P.O. Box)      City      County      Zip

**Applicant must be a member of the qualifying organization and authorized by an Officer, Director or Chairperson of  
the Organization named in Question #1. (Signature required in section #18)**

6. Applicant: \_\_\_\_\_  
Last      First      Middle      Date of Birth

7. Applicant's Mailing Address: \_\_\_\_\_  
Street      City      State      Zip

8. Phone Numbers: ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Site Owner #      Applicant's Business #      Applicant's Home #

9. Date(s) & Hours of Event: (Remember: you cannot sell alcohol before 10:00 a.m. on Sunday)

	Date	Day of Week	Hours from A.M./P.M.	To A.M./P.M.
Day 1:	_____	_____	_____	_____
Day 2:	_____	_____	_____	_____
Day 3:	_____	_____	_____	_____
Day 4:	_____	_____	_____	_____
Day 5:	_____	_____	_____	_____
Day 6:	_____	_____	_____	_____
Day 7:	_____	_____	_____	_____
Day 8:	_____	_____	_____	_____
Day 9:	_____	_____	_____	_____
Day 10:	_____	_____	_____	_____

10. Has the applicant been convicted of a felony in the past five years, or had a liquor license revoked?  
☐ YES ☐ NO (attach explanation if yes)

11. This organization has been issued a special event license for \_\_\_\_\_ days this year, including this event  
(not to exceed 10 days per year).

12. Is the organization using the services of a promoter or other person to manage the event? ☐ YES ☐ NO  
If yes, attach a copy of the agreement.

13. List all people and organizations who will receive the proceeds. Account for 100% of the proceeds.  
**THE ORGANIZATION APPLYING MUST RECEIVE 25% OF THE GROSS REVENUES OF THE SPECIAL  
EVENT LIQUOR SALES.**

Name \_\_\_\_\_ Percentage \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_ Percentage \_\_\_\_\_

Address \_\_\_\_\_

(Attach additional sheet if necessary)

14. Knowledge of Arizona State Liquor Laws Title 4 is important to prevent liquor law violations. If you have  
any questions regarding the law or this application, please contact the Arizona State Department of Liquor  
Licenses and Control for assistance.

NOTE: ALL ALCOHOLIC BEVERAGE SALES MUST BE FOR CONSUMPTION AT THE EVENT SITE ONLY.  
"NO ALCOHOLIC BEVERAGES SHALL LEAVE SPECIAL EVENT PREMISES."

15. What security and control measures will you take to prevent violations of state liquor laws at this event?  
(List type and number of security/police personnel and type of fencing or control barriers if applicable)

\_\_\_\_\_ # Police ☐ Fencing  
\_\_\_\_\_ # Security personnel ☐ Barriers

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Is there an existing liquor license at the location where the special event is being held? ☐ YES ☐ NO  
If yes, does the existing business agree to suspend their liquor license during the time  
period, and in the area in which the special event license will be in use? ☐ YES ☐ NO

**(ATTACH COPY OF AGREEMENT)**

\_\_\_\_\_ ( ) \_\_\_\_\_  
Name of Business Phone Number

17. Your licensed premises is that area in which you are authorized to sell, dispense, or serve spirituous liquors  
under the provisions of your license. The following page is to be used to prepare a diagram of your special  
event licensed premises. Please show dimensions, serving areas, fencing, barricades or other control  
measures and security positions.

**SPECIAL EVENT LICENSED PREMISES DIAGRAM**  
**(This diagram must be completed with this application)**

Special Event Diagram: (Show dimensions, serving areas, and label type of enclosure and security positions)

NOTE: Show nearest cross streets, highway, or road if location doesn't have an address.



**THIS SECTION TO BE COMPLETED ONLY BY AN OFFICER, DIRECTOR OR CHAIRPERSON OF THE ORGANIZATION NAMED IN QUESTION #1**

18. I, \_\_\_\_\_ declare that I am an **Officer/Director/Chairperson** appointing the  
(Print full name)  
applicant listed in Question 6, to apply on behalf of the foregoing organization for a Special Event Liquor License.

X \_\_\_\_\_  
(Signature) (Title/Position) (Date) ( ) (Phone #)

State of \_\_\_\_\_

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this

\_\_\_\_\_ Day

\_\_\_\_\_ Month

\_\_\_\_\_ Year

My Commission expires on: \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of NOTARY PUBLIC)

**THIS SECTION TO BE COMPLETED ONLY BY THE APPLICANT NAMED IN QUESTION #6**

19. I, \_\_\_\_\_ declare that I am the APPLICANT filing this application as  
(Print full name)  
listed in Question 6. I have read the application and the contents and all statements are true, correct and complete.

X \_\_\_\_\_ State of \_\_\_\_\_ County of \_\_\_\_\_  
(Signature) The foregoing instrument was acknowledged before me this

\_\_\_\_\_ Day

\_\_\_\_\_ Month

\_\_\_\_\_ Year

My commission expires on: \_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature of NOTARY PUBLIC)

**You must obtain local government approval. City or County *MUST* recommend event and complete item #20. The local governing body may require additional applications to be completed and submitted 60 days in advance of the event. Additional licensing fees may also be required before approval may be granted.**

**LOCAL GOVERNING BODY APPROVAL SECTION**

20. I, \_\_\_\_\_ hereby recommend this special event application  
(Government Official) (Title)  
on behalf of \_\_\_\_\_  
(City, Town or County) (Signature of OFFICIAL) (Date)

**FOR DLLC DEPARTMENT USE ONLY**

Department Comment Section:

\_\_\_\_\_  
(Employee)

\_\_\_\_\_  
(Date)

☐ APPROVED

☐ DISAPPROVED

BY:

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

**SERIES:            15 SPECIAL EVENT LICENSE (Temporary)**

**Non-transferable**

**On-sale retail privileges**

**PURPOSE:**

**Allows a charitable, civic, fraternal, political or religious organization to sell and serve spirituous liquor for consumption only on the premises where the spirituous liquor is sold, and only for the period authorized on the license. This is a temporary license.**

**ADDITIONAL RIGHTS AND RESPONSIBILITIES:**

**The applicant for a special event license must request a special event application from the Department and file the application with the governing body of the city or town, or Board of Supervisors of an unincorporated area of a county (where the special event is to take place) for approval or disapproval. Some local governing bodies may require approximately 60 days prior notice.**

**If the application is approved by the local authority, and the event meets the requirements for granting the license, the Director will issue a special event license to the qualifying organization.**

**Qualifying organizations will be granted a special event license for no more than ten (10) days in a calendar year. Events must be held on consecutive days and at the same location or additional licenses will be required. The license is automatically terminated upon closing of the last day of the event or the expiration of the license, whichever occurs first.**

**The qualified organization must receive at least twenty-five percent (25 %) of the gross revenues of the special event liquor sales.**

**A person selling spirituous liquor under a special event license must purchase the spirituous liquor from the holder of a license authorized to sell off-sale; *except that*, in the case of a non-profit organization which has obtained a special event license for the purpose of charitable fund raising activities, a person may receive the spirituous liquor from a wholesaler as a donation.**

**AVERAGE APPROVAL TIME: One (1) to seven (7) days.**

**PERIOD OF ISSUANCE:**

**Issued for no more than a cumulative total of ten (10) days in a calendar year. A special event may be held for more than one (1) day, but it must be held on consecutive days and at the same location or additional licenses will be required.**

**FEES:    \$25.00 per day.**

**ARIZONA STATUTES AND REGULATIONS:**

**ARS 4-203.02, 4-244, 4-261; Rule R19-1-228, R19-1-235, R19-1-309.**

**Disabled individuals requiring special accommodations please call (602) 542-9027**

**SURPRISE FIRE DEPARTMENT  
APPLICATION TO DISPLAY AND SELL CONSUMER FIREWORKS**

Applications must be submitted fifteen (15) business days prior to opening. One application is required for each fireworks stand location.

**Applicant shall meet with Fire Department staff regarding the application. This step may take place prior to Temporary Use Permit application submittal, and is required prior to approval by the Fire Department.**

The following items are required for approval:

- A list that describes all fireworks to be sold.
- A sample of each item to be sold (When requested).
- Verification of a city business license.
- A certificate of insurance in accordance with city requirements. (Attached)
- For retail sales or public display, provide a complete description and inventory of fireworks that will be used/sold.
- How many points of sale (cashier locations) are proposed? \_\_\_\_\_
- How many display locations are proposed? \_\_\_\_\_

***Please note: Fireworks may be tested on site for suitability prior to sale.***

**OPERATOR**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Contact: \_\_\_\_\_ Number: \_\_\_\_\_

**FIREWORKS VENDOR/COMPANY**

Name: \_\_\_\_\_

Address (No PO Boxes, provide physical address only): \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Number: \_\_\_\_\_

Please choose one of the following:

Indoor ☐

Outdoor ☐

**The applicant hereby requests an inspection certificate to display and sell fireworks within the City of Surprise and is subject to the following requirements, together with any and all legal requirements that may apply.**

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**IN ACCORDANCE WITH SECTION 34-74 OF THE SURPRISE MUNICIPAL CODE, THE USE OF FIREWORKS, EXCEPT NOVELTY ITEMS AS DEFINED, INCLUDING PERMISSIBLE CONSUMER FIREWORKS IS PROHIBITED.**

**INSURANCE REQUIREMENTS**

Applicant shall maintain, at its sole cost and expense, in full force and effect, during the term of this agreement, insurance with the following policy limits:

- a. Comprehensive General Liability: Nine million dollars (\$9,000,000) per occurrence and one million dollars (1,000,000) combined aggregate.

Insurers. All insurance provided for herein above shall be affected under valid and enforceable policies issued by financially responsible insurers which meet the requirements for insurers which are subject to the service of legal process in the State of Arizona and rated A- or better by A.M. Best Company. All insurance obtained pursuant to this Agreement shall be primary, noncontributory, not contingent upon and not in excess of any other insurance, and shall be carried in favor of and **name City as a named insured**. In the event any insurance policy required by this Agreement is written on a "claims made" basis, coverage shall extend for two (2) years past termination of this Agreement.

Certificates of Insurance. Prior to commencement of the event under this Agreement, applicant shall furnish city with certificates of insurance, or formal endorsements, issued by the applicants insurer(s), as evidence that policies providing the required coverage's, conditions and limits by this Agreement are in full force and effect. If a policy does expire during the term of this Agreement, a renewal certificate must be sent to the city fifteen (15) days prior to the expiration date.





# SURPRISE POLICE DEPARTMENT

## OFF-DUTY LETTER AGREEMENT



This Letter Agreement ("Agreement") is entered into this \_\_\_\_\_ day of \_\_\_\_\_, 2013,  
(day) (month)

between \_\_\_\_\_,  
(full name of business entity (including dba) or person)

located at \_\_\_\_\_ ("Contractor"),  
(numerical street address) (city) (state) (zip code)

and the City of Surprise, acting by and through the Surprise Police Department, located at 14250 W. Statler Plaza, Suite 103, Surprise, AZ 85374-7481 ("City").

### RECITALS

The Contractor and the City desire to enter into this Agreement for the purpose of allowing Surprise Police Department (SPD) sworn officers to provide security and/or traffic control services at various locations throughout the City of Surprise for an agreed upon hourly wage, pursuant to the Terms and Conditions of this Agreement.

### TERMS AND CONDITIONS

The parties agree to the following Terms and Conditions:

1. Unless earlier terminated pursuant to paragraph #5, this Agreement will expire no later than midnight, January 01, 2014. Any outstanding obligations of the Contractor hereunder (e.g., fees) will survive the expiration or termination of this Agreement for any reason.
2. All temporary employment activities of SPD personnel are conditioned upon the receipt of prior approval from the Chief of Police, or his designee, to engage in said temporary employment activities.
3. All off-duty employment at temporary work sites under this Agreement will be arranged with the SPD Off-Duty Work Coordinator.
4. All SPD employees stationed at temporary work sites pursuant to this Agreement are subject to mobilization by SPD in the event of an emergency, or pursuant to SPD bona fide staffing needs.
5. The Chief of Police or his designee may cancel or terminate any off-duty, temporary work assignment under this Agreement whenever necessitated by virtue of a police or community emergency, and for any other situations where, under the circumstances, said cancellation or termination is deemed appropriate by the Chief of Police or his designee.
6. All temporary work sites pursuant to this Agreement are subject to onsite inspection and review by the Chief of Police or his designee. The Chief of Police or his designee has the right to view and assess the demeanor of all SPD employees stationed at any temporary work site to insure that SPD goals and mission are maintained to an acceptable SPD standard.
7. Pursuant to Surprise Police Department Policies and Operational Procedures (ADM 36: Extra/Off Duty Secondary Employment Section K Sub Section 8) no SPD employee will be permitted to work any temporary work assignment for a period of eight (8) hours prior to the start of their regularly scheduled duty-day nor will any SPD employee be allowed to work for more than twenty-four (24) hours per week, without the prior written approval of the Chief of Police or his designee.
8. All temporary work assignments under this Agreement are subject to all applicable rules, regulations, procedures, and policies as may be established by the City of Surprise.
9. The Contractor must cooperate fully in the identification, apprehension and prosecution of any person involved in any crime that occurs at any temporary work site while an SPD member staffs the same pursuant to this Agreement.
10. This Agreement must be executed by both parties **prior** to any staffing of off-duty personnel to a temporary site. Staffing arrangements can be made by contacting the SPD Off Duty Coordinator. Contact information is available on the web at [www.surpriseaz.gov/police](http://www.surpriseaz.gov/police).

11. The Contractor agrees and acknowledges that all off-duty employment under this Agreement is provided by SPD personnel as independent contractors of Contractor and that SPD personnel on such off-duty assignments are not acting within the course and scope of their employment with SPD.
12. The Contractor must give at least forty-eight (48) hours advance notice of the need for any temporary, off-duty employment. Requests with less than forty-eight (48) hours notice will be considered a late-request and the Contractor must pay an additional fee of \$5.00 per hour. The late-request fee is paid to the assigned off-duty employee.
13. The Contractor will incur a minimum charge of four (4) hours for any temporary, off-duty employment, pursuant to the schedule in paragraph #17 of this Agreement.
14. The Contractor must purchase and maintain the insurance required by this Agreement, as evidenced by a Certificate of Insurance, **prior** to the commencement of any SPD staffing at any temporary work site. The Certificate of Insurance must be completed and filed with the SPD Off-Duty Work Coordinator **prior** to the commencement of any temporary staffing under this Agreement.
15. Pursuant to this agreement, must maintain insurance and produce a Certificate of Insurance demonstrating following levels of insurance coverage:
  - a. Contractor must maintain "occurrence" form Commercial General Liability Insurance with a limit of not less than \$1,000,000 for each occurrence, \$1,000,000 Products and Completed Operations Annual Aggregate, and a \$1,000,000 General Aggregate limit. The policy must cover liability arising from premises, operations, independent contractors, products-completed operations, personal injury and contractual liability for the liability assumed under this Agreement.
  - b. Automobile Liability Insurance of one million (\$1,000,000) dollars each Accident, including hired and non-owned automobiles.
16. To the fullest extent permitted by law, Contractor shall indemnify, defend and hold harmless the City, its council members, officers, employees and agents ("Indemnified Parties"), for, from and against any and all losses, claims, damages, and liabilities, including reasonable attorney fees and/or litigation expenses, made under any theory of liability whatsoever ("Claims") relating to, arising out of, caused by or based upon any act or omission in connection with the work or services performed under this Agreement.
17. Following is the fee schedule for all temporary, off duty employment pursuant to this Agreement:

<b>Police Officer</b>	<b>\$40.00 per hour Traffic Control</b>
<b>Police Officer</b>	<b>\$40.00 per hour Security</b>
<b>Supervisor</b> (required when 3 or more officers are needed)	<b>\$45.00 per hour</b>
<b>Administration Fee per Employee per Hour Worked</b>	<b>\$1.00 per hour</b>
<b>Late-Request Fee per Employee</b> (less than 48 hours notice)	<b>\$5.00 per hour</b>
<b>Patrol Vehicle(s)</b> (see paragraph #18)	<b>\$7.00 per hour</b>

18. When a patrol vehicle is requested, the officer assigned will be compensated an additional 30 minutes (4.5 hour minimum) in order to obtain the patrol vehicle from the police department prior to the start of the job and to return it at the completion of the job. Use of a patrol vehicle is not authorized for any job outside the City of Surprise.
19. SPD personnel Checks must be **made payable to each individual employee**. Checks for the Administration Fee and Patrol Vehicle Usage Fee must be made payable to the City of Surprise. Checks must be mailed to the following address:
 

Surprise Police Department  
 14250 W. Statler Plaza, Suite 103  
 Surprise, AZ 85374  
 ATTN: Off-Duty Work Coordinator
20. Payment (individual checks) must be received by SPD within thirty (30) days of the invoice date. Payments received after thirty (30) days are considered late. The Contractor must pay a penalty fee of five (5) percent of the original invoiced amount to each employed off-duty officer, and to the City of Surprise for the Administration Fee and the Patrol Vehicle Usage Fee for every thirty (30) days the payment is late.
21. The Contractor must notify the SPD Off-Duty Work Coordinator at least twenty-four (24) hours prior to the cancellation of any temporary work assignment under this Agreement. Notice must be personally verbalized **AND** in writing. Verbal notice must be made to appropriate SPD personnel. Voice mail or other messages are insufficient. SPD personnel should be contacted in the following order until personal contact is established: (1) SPD Off-Duty Coordinator (customarily staffed Mon-Thu, 7am – 5pm); (2) SPD Administrative Officer (customarily staffed Mon-Thu, 7am-5pm). Written notice may be hand delivered at the address listed in Paragraph 19, or faxed to the SPD Off Duty Coordinator. Contact information can be found at [www.surpriseaz.gov/police](http://www.surpriseaz.gov/police). Failure to adhere to the twenty-four (24) hour cancellation requirement will result in a charge to the Contractor of the minimum four (4) hour fee.

22. The Contractor must complete the following information prior to the approval of any temporary work assignment under this agreement:

**CONTRACTOR NAME (AUTHORIZED REPRESENTATIVE)** \_\_\_\_\_

**PHONE** \_\_\_\_\_ **FAX** \_\_\_\_\_

**BILL TO** \_\_\_\_\_

**AGREED AND UNDERSTOOD:**

\_\_\_\_\_  
**CONTRACTOR SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**MICHAEL T. FRAZIER (or Designee)**  
**CHIEF OF POLICE**

\_\_\_\_\_  
**DATE**

This Letter Agreement approved as to form by Misty Leslie, Assistant City Attorney, Surprise Police Legal Advisor.